

REQUIRED DOCUMENTATION

South Carolina Department of Health and Environmental Control

Name of Facility:

Facility Contact:

Phone #:

Certificate of Need:

CON Date:

City or Town:

DHEC Project #:

Description of Project: (ATTACHED)

(A) Documentation Needed For Plan Review/ Acceptance Letter

DHEC Licensing Application		Storm water (OCRM)	
Certificate of Need Part "B" (detailed description of project)		DHEC Rad Health equipment log # (6 digit)	
Sewer Permit		SC State Fire Marshal (SFM)Sprinkler Specification Sheet	
Zoning Permit		Local Building Permit	
Water Permit		DHEC Plan Acceptance Letter (also kitchen plan)	

(B) Documentation for Final Construction Inspection

Completed projects can not be inspected for Final Licensing without the appropriate documentation listed below completed and furnished in a notebook, at the Final Construction Inspection. Please put the dates of the submitted documentation in the blanks. Several of the items may not apply to your project because this form is for all types of licensed facilities. Contact Health Facilities Construction for Questions (803) 545-4370.

Heating/Mechanical Inspection		Elevator Certification	
Electrical Inspection		Nurse Call Certification	
Bacteriological Test		Emergency Generator Certification	
Flame Spread Documentation		HVAC Air Balance	
Local Certificate of Occupancy		Back Flow Preventor	
DHEC Fire Marshal Inspection		Medical Gas Certification	
Fire Alarm System Certification / Third Party		Dialysis Water Certification	
Kitchen Hood Extinguishing Certification		Sprinkler Contractor Above Ground Certification	
SC SFM Sprinkler Plan Approval Letter		Sprinkler Contractor Below Ground Certification	